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Enhancing Resilience and Recovery of Reservists

Filed under [COMMUNITY SUPPORT](#), [FAMILIES](#), [FLEET AND THE FLEET MARINE FORCE](#) (NO COMMENTS)

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As many as 40 to 42 percent of Reserve and National Guard members returning from deployment report health conditions.

It is well known that extended and repeat deployments can impact the readiness and psychological health of Sailors and Marines who put on their uniform every day in defense of freedom. But what about the Sailors and Marines who temporarily set aside civilian and family responsibilities and lace up their boots in support of the same cause? They receive the same training pre-deployment and experience the same potentially traumatic events, such as injury and loss, during deployment. Yet, studies indicate that Reserve and National Guard members may be at greater risk for developing psychological health conditions than their active duty counterparts. How can we bridge the gap?

Know the Facts

As many as 40 to 42 percent of Reserve

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and National Guard members returning from deployment report experiencing psychological health conditions (Hoge, Auchterlonie, & Milliken, 2006; Seal, Metzler, Gima, Bertenthal, Maguen, & Marmar, 2009). In addition, rates of post-traumatic stress disorder (PTSD) and depression actually increase in these service members during the period following a return from deployment, with some reports more than doubling in the first six months post-deployment (Milliken et al., 2007). This is substantially greater than that observed in active duty service members with similar combat experiences and suggests that post-deployment reintegration issues may pose a significant obstacle for Reserve and National Guard members (Milliken et al., 2007; Thomas, Wilk, Riviere, McGurk, Castro, & Hoge, 2010).



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Identify the Challenges

Significant differences in occupations, social and military support structures likely contribute to the additional stress experienced by Reserve service members following their demobilization. Reservists are rarely employed in the military full time and frequently hold jobs in the civilian sector that may be disrupted by prolonged absences during deployments. When they return home, some Reservists may be out of uniform and back at their civilian jobs within weeks or even days, which can isolate them from the military community and its support systems. Many Reservists live and work in rural locations away from military bases, which can impede access to Medical Treatment Facilities (MTFs). This geographical limitation can delay treatment and further isolate a service member in need. In addition, families of Reservists may be less accustomed to the frequent and extended absences of their service member and are less likely to be integrated into a military community and culture that can offer support before, during, and after deployments (Erbes, Kaler, Schult, Polusny, & Arbisi, 2011).

Overcome the Stigma



Research suggests that only 23 to 40 percent of service members who were thought to have a moderate or severe psychological health condition following a recent deployment received professional assistance.

Although Reservists face unique challenges when it comes to serving in the military and living in the civilian population, they may share the same negative perception of seeking support for a psychological condition as their active duty counterparts. Research suggests that only 23 to 40 percent of service members who were thought to have a moderate or severe psychological health condition following a recent deployment received professional assistance. Service members cite a variety of perceived barriers to psychological health services, including lack of trust toward professionals, the expense of seeking treatment, and

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the perceived stigma of receiving psychological health support (Hoge et al., 2004; House Armed Services Committee 111-491, Report to Congress on Barriers to Seeking Treatment, 2012).

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Bridge the Gap

The [U.S. Bureau of Medicine and Surgery \(BUMED\)](#) created the [Psychological Health Outreach Program \(PHOP\)](#) to serve as a psychological “safety net” for Reservists and their families who are in need of support services. Licensed mental health clinicians work to address and overcome the unique challenges that Reservists face and reduce the stigma of seeking help. They provide assistance with issues related to PTSD, Traumatic Brain Injury (TBI), depression, substance abuse, and relational issues. Services are available at six Navy and six Marine regional offices, which offer behavioral health care screenings, referrals, and 24/7 phone and email support. PHOP staff also provide Command support in the form of briefings and consultations. If you or someone you know is a Reservist in need of support reintegrating or transitioning back to civilian life, don’t hesitate to reach out for assistance.

If you or someone you know is contemplating suicide, seek immediate assistance. Do not leave the person alone. Call 911, seek help from a healthcare professional and/or call the [Military Crisis Line](#). Chaplains, corpsmen, health care professionals at your MTF or branch clinic, and your local Fleet and Family Support Center can also provide assistance.

Available Resources

[Psychological Health Outreach Program \(PHOP\)](#)

[Military OneSource](#)

[Military Crisis Line](#)

[Marine DSTRESS Line](#)

[Vets4Warriors](#)

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